HEALTHCARE ASSOCIATED INFECTIONS PROGRESS

OREGON

Healthcare-associated infections (HAIs) are infections patients can get while receiving medical treatment in a healthcare facility. The standardized infection ratio (SIR) is a statistic used to track HAI prevention progress over time; lower SIRs indicate better progress. The infection data are collected through CDC's National Healthcare Safety Network (NHSN). Oregon requires hospitals to publicly report at least one HAI to NHSN, and HAI data for nearly all U.S. hospitals are published on the Hospital Compare website.



✓ CENTRAL LINE-ASSOCIATED BLOODSTREAM INFECTIONS

CLABSIs **▼** 61% LOWER COMPARED TO NAT'L BASELINE

LEGEND

State

A central line is a tube that a doctor usually places in a large vein of a patient's neck or chest to give important medical treatment. When not put in correctly or kept clean, central lines can become a freeway for germs to enter the body and cause deadly infections in the blood.

Oregon hospitals did not report a significant change in CLABSIs between 2011 and 2012.



O Oregon hospitals have an SIR worse than the national SIR of 0.56.

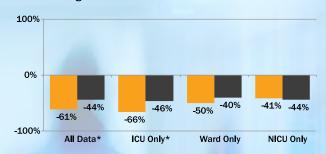
CAUTIS • 41% HIGHER COMPARED TO NAT'L BASELINE

When a urinary catheter is not inserted correctly, not kept clean, or left in a patient for too long, germs can travel through the catheter and cause a catheter-associated urinary tract infection in the urinary system, which includes the bladder and kidneys.



11% of Oregon hospitals have an SIR worse than the national SIR of 1.03.

Changes in CLABSI vs. 2008 National Baseline



CATHETER-ASSOCIATED URINARY TRACT INFECTIONS

* Statistically significant difference

and quality

National

State examines data and reviews

medical charts for this infection to

infection to assess completeness

confirm accuracy and completeness State investigates data for this

Y Fewer than 5 facilities reported data

Changes in CAUTI vs. 2009 National Baseline



SSIS: COLON SURGERY \$\rightarrow\$ 25\% lower compared to Nat'l Baseline

SSIS: ABDOMINAL HYSTERECTOMY \$\ 58\% LOWER COMPARED TO NAT'L BASELINE

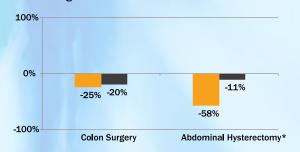
SURGICAL SITE INFECTIONS: COLON SURGERY 0 AND ABDOMINAL HYSTERECTOMY SURGERY

When germs get into an area where surgery is or was performed, patients can get a surgical site infection. Sometimes these infections involve the skin only. Other SSIs can involve tissues under the skin, organs, or implanted material.



O Oregon hospitals have a colon surgery SIR worse than the national SIR of 0.80.

Changes in SSI vs. 2008 National Baseline



Not enough data to report how many Oregon hospitals have an abdominal hysterectomy SIR significantly worse than the national SIR of 0.89.





OREGON

Learn how your hospital is preventing infections: www.medicare.gov/hospitalcompare For more information:

- 2012 HAI Progress Report: www.cdc.gov/hai/progress-report/
- Preventing HAIs: www.cdc.gov/hai
- NHSN: www.cdc.gov/nhsn
- HAIs in Oregon: public.health.oregon.gov/DiseasesConditions/CommunicableDisease/HAI/Pages/index.aspx



HEALTHCARE-ASSOCIATED INFECTION (HAI) DATA gives healthcare facilities and public health agencies knowledge to design, implement, and evaluate HAI prevention efforts.

WHAT IS THE STANDARDIZED INFECTION RATIO?

The **standardized infection ratio (SIR)** is a statistic used to track healthcareassociated infection prevention progress over time. The SIR for a facility or state is adjusted to account for factors that might cause infection rates to be higher or lower, such as hospital size, teaching status, the type of patients a hospital serves, and surgery and patient characteristics.



In some cases, states that work to validate, or double check, HAI data may have higher SIRs since they are actively looking for infections.

WHAT DOES THE STANDARDIZED INFECTION RATIO MEAN?

IF THE STATE SIR IS:



There were more infections reported in the state in 2012 compared to the national baseline data, **indicating there has been an increase** in infections.



There were about the same number of infections reported in the state in 2012 compared to the national baseline data, **indicating no progress** has been made.



There were fewer infections reported in the state in 2012 compared to the national baseline data, indicating progress has been made in preventing infections.

WHAT IS OREGON DOING TO PREVENT HEALTHCARE-ASSOCIATED INFECTIONS?

Oregon is one of 10 state health departments participating in CDC's Emerging Infections Program, which allows for extra surveillance and research of HAIs. Oregon has a state mandate to publicly report at least one HAI to NHSN.

Oregon has several prevention efforts (known as prevention collaboratives) to reduce specific HAIs, including:

- Central line-associated bloodstream infections
- Surgical site infections
- Clostridium difficile, deadly diarrheal infections
- MRSA infections
- Multidrug-resistant organism infections

Oregon implemented and led prevention efforts to improve antibiotic stewardship.

Not all hospitals are required to report these infections; some hospitals do not use central lines or urinary catheters, or do not perform colon or abdominal hysterectomy surgeries.

	NUMBER OF OREGON HOSPITALS THAT REPORTED DATA TO CDC'S NHSN IN 2012 Total Hospitals: 64+		STATE SIR	NAT'L SIR
	CLABSI 47 hospitals	Oregon's 2012 state CLABSI SIR is significantly better than the 2012 national SIR.	0.39	0.56
	CAUTI 46 hospitals	Oregon's 2012 state CAUTI SIR is significantly worse than the 2012 national SIR.	1.41	1.03
	SSI, Colon Surgery 49 hospitals	Oregon's 2012 state Colon Surgery SSI SIR is similar to the 2012 national SIR.	0.75	0.80
	SSI, Abdominal Hysterectomy 46 hospitals	Oregon's 2012 state Abdominal Hysterectomy SSI SIR is significantly better than the 2012 national SIR.	0.42	0.89

THIS REPORT IS BASED ON 2012 DATA. PUBLISHED MARCH 2014